

Billing Code: 4163-18-P

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

**Building and Strengthening the Development of the Republic
of Haiti's Central HIV/AIDS Quality-Assurance/Quality-
Control (QA/QC) Laboratory and the Associated National
Network of QA/QC Laboratories in Haiti, as part of the
President's Emergency Plan for AIDS Relief**

Announcement Type: New

Funding Opportunity Number: CDC-RFA-AA212

Catalog of Federal Domestic Assistance Number: 93.067

Key Dates:

Application Deadline: September 12, 2005

I. Funding Opportunity Description

Authority: This program is authorized under Sections 301(a) and 307 of the Public Health Service Act, [42 U.S.C sections 241 and 2421], as amended, and under Public Law 108-25 (United States Leadership Against HIV/AIDS, Tuberculosis and Malaria Act of 2003) [22 U.S.C. 7601].

Background: President Bush's Emergency Plan for AIDS Relief has called for immediate, comprehensive and evidence-based

action to turn the tide of global HIV/AIDS. The initiative aims to treat more than two million HIV-infected people with effective combination anti-retroviral therapy by 2008; care for ten million HIV-infected and affected persons, including those orphaned by HIV/AIDS, by 2008; and prevent seven million infections by 2010, with a focus on 15 priority countries, including 12 in sub-Saharan Africa. The five-year strategy for the Emergency Plan is available at the following Internet address:

<http://www.state.gov/s/gac/rl/or/c11652.htm>

Over the same time period, as part of a collective national response, the Emergency Plan goals specific to Haiti are to treat at least 25,000 HIV-infected individuals and care for 125,000 HIV-affected individuals, including orphans.

An essential element of preventing new cases of HIV infection in Haiti is to ensure as much of the population as possible has adequate access to screening, treatment, and care facilities. Haiti's HIV prevalence rate in adults is estimated at between 3.1 and 5.6 percent, according to the Haitian Ministry of Health-Ministère de la Santé Publique et de la Population (MSPP) and the *2004 Annual Report* from the Joint United Nations Programme on HIV and

AIDS (UNAIDS), respectively. Access to prevention and treatment is limited among the Haitian population because of an underdeveloped public health infrastructure and a lack of clinical capacity.

Purpose:

The purpose of this funding announcement is to build progressively an indigenous, sustainable response to the national HIV epidemic through the rapid expansion of innovative, culturally appropriate, high-quality HIV/AIDS prevention and care interventions, and improved linkages to HIV counseling and testing and HIV treatment to target rural and other underserved populations in Haiti.

Under the leadership of the U.S. Global AIDS Coordinator, as part of the President's Emergency Plan, HHS works with host countries and other key partners to assess the needs of each country and design a customized program of assistance that fits within the host nation's strategic plan.

Measurable outcomes of the program will be in alignment with the numerical goals of the President's Emergency Plan for AIDS Relief and one (or more) of the following

performance goal(s) for the National Center for HIV, Sexually Transmitted Disease and Tuberculosis Prevention of the Centers of Disease Control and Prevention (CDC)(NCHSTP) within HHS: Increase the proportion of HIV-infected people who are linked to appropriate prevention, care and treatment and to strengthen the capacity nationwide to monitor the epidemic, develop and implement effective HIV prevention interventions and evaluate prevention programs.

This announcement is only for non-research activities supported by HHS, including the CDC. If an applicant proposes research activities, HHS will not review the application. For the definition of "research," please see the HHS/CDC web site at the following Internet address:
<http://www.cdc.gov/od/ads/opspoll1.htm>.

Activities:

The recipient of these funds is responsible for activities in multiple program areas designed to target underserved populations in Haiti. Either the awardee will implement activities directly or will implement them through its subgrantees and/or subcontractors; the awardee will retain overall financial and programmatic management under the oversight of HHS/CDC and the strategic direction of the

Office of the U.S. Global AIDS Coordinator. The awardee must show a measurable progressive reinforcement of the capacity of indigenous organizations and local communities to respond to the national HIV epidemic, as well as progress towards the sustainability of activities.

Applicants should describe activities in detail as part of a four-year action plan (U.S. Government Fiscal Years 2005-2008 inclusive) that reflects the policies and goals outlined in the five-year strategy for the President's Emergency Plan.

The grantee will produce an annual operational plan in the context of this four-year plan, which the U.S. Government Emergency Plan team on the ground in Haiti will review as part of the annual Emergency Plan for AIDS Relief Country Operational Plan review and approval process managed by the Office of the U.S. Global AIDS Coordinator. The grantee may work on some of the activities listed below in the first year and in subsequent years, and then progressively add others from the list to achieve all of the Emergency Plan performance goals, as cited in the previous section. HHS/CDC, under the guidance of the U.S. Global AIDS Coordinator, will approve funds for activities on an annual

basis, based on documented performance toward achieving Emergency Plan goals, as part of the annual Emergency Plan for AIDS Relief Country Operational Plan review and approval process.

Based on its competitive advantage and proven field experience, the winning applicant will undertake a broad range of activities to meet the numerical Emergency Plan targets outlined in this Program Announcement. For each of these activities, the grantee will give priority to evidence-based, yet culturally adapted, innovative approaches.

Awardee activities for this program are as follows:

1. Build capacity within the public health laboratory system in Haiti.
2. Build the capacity of lab technicians and laboratory support personnel by providing training in QA/QC procedures and protocols, including proper maintenance of laboratory testing equipment, use of appropriate reagents, etc.
3. Ensure all laboratory personnel receive training in local languages in the implementation of universal precautions

and all other appropriate methods to reduce exposure to human blood-borne pathogens. "Universal precautions" is a term used to describe a method of infection control in which all human blood, and certain body fluids, are treated as if known to be infectious for HIV, Hepatitis B virus (HBV) or other blood-borne pathogens.

4. Work to link activities described here with related HIV care and other basic social services in the area, and promote coordination at all levels, including through bodies such as village, district, regional and national HIV coordination committees and networks of faith-based organizations.
5. Participate in relevant national technical coordination committees and in national process(es) to define, implement and monitor simplified small grants program(s) for faith- and community-based organizations, to ensure local stakeholders receive adequate information and assistance to engage and access funding opportunities supported by the President's Emergency Plan and other donors.
6. Progressively reinforce the capacity of faith- and community-based organizations and village and district AIDS committees to promote quality, local ownership, accountability and sustainability of activities.

7. Develop and implement a project-specific participatory monitoring and evaluation plan by drawing on national and U.S. Government requirements and tools, including the strategic information guidance provided by the Office of the U.S. Global AIDS Coordinator.

Administration

Awardee must comply with all HHS management requirements for meeting participation and progress and financial reporting for this cooperative agreement (See HHS Activities and Reporting sections below for details), and comply with all policy directives established by the Office of the U.S. Global AIDS Coordinator.

In a cooperative agreement, HHS staff is substantially involved in the program activities, above and beyond routine grant monitoring.

HHS/CDC Activities for this program are as follows:

1. Strengthen the capacity of health facilities managed by the Haitian MSPP to deliver HIV/AIDS prevention, care and treatment.
2. Set up a central anti-retroviral (ARV) training laboratory at the MSPP's Hopital de la Paix (Delmas 33, Port-au-Prince) and at a National Reference Laboratory,

currently under construction.

3. Coordinate the development of training curricula and other training materials.
4. Coordinate training and logistics to train laboratory personnel from 16 ARV sites in ARV laboratory services.
5. Procure maintenance and repair contracts for laboratory equipment used in the diagnosis and treatment of HIV/AIDS, sexually transmitted infections (STI) and tuberculosis (TB).
6. Procure, insure, maintain and purchase gas for one vehicle for the purpose of performing site visits and transporting lab personnel for supervision and quality assurance.
7. Procure software, computers and printers to improve tracking provided by three laboratories.
8. Coordinate and support training courses in local languages in biomedical engineering and equipment repair and maintenance for 16 laboratory staff members.

HHS/CDC also will provide logistics to ensure any travel arrangements for these staff members.
9. Provide technical assistance and support in the MSPP's development of a National QA/QC Laboratory Plan to provide system-wide lab support for HIV/AIDS, STI and TB service delivery.

10. Provide equipment and commodities related to testing and associated diagnostics for HIV/AIDS, STIs and TB, acquired in a transparent and competitive process.
11. Hire and support appropriate staff, as needed, in a transparent and competitive process.
12. Support development and operation of an electronic database system.
13. Provide and install hardware necessary for the operation of the database system described above, acquired in a transparent and competitive process.
14. Support operational research and technical assistance for operational research associated with the national QA/QC Laboratory.
15. Support the annual technical review of the MSPP's national QA/QC laboratory.
16. Organize an orientation meeting with the grantee to brief it on applicable U.S. Government, HHS, and Emergency Plan expectations, regulations and key management requirements, as well as report formats and contents. The orientation could include meetings with staff from HHS agencies and the Office of the U.S. Global AIDS Coordinator.
17. Review and approve the process used by the grantee to select key personnel and/or post-award subcontractors

and/or subgrantees to be involved in the activities performed under this agreement, as part of the Emergency Plan for AIDS Relief Country Operational Plan review and approval process, managed by the Office of the U.S. Global AIDS Coordinator.

18. Review and approve grantee's annual work plan and detailed budget, as part of the Emergency Plan for AIDS Relief Country Operational Plan review and approval process, managed by the Office of the U.S. Global AIDS Coordinator.
19. Review and approve grantee's monitoring and evaluation plan, including for compliance with the strategic information guidance established by the Office of the U.S. Global AIDS Coordinator.
20. Meet on a monthly basis with grantee to assess monthly expenditures in relation to approved work plan and modify plans as necessary.
21. Meet on a quarterly basis with grantee to assess quarterly technical and financial progress reports and modify plans as necessary.
22. Meet on an annual basis with grantee to review annual progress report for each U.S. Government Fiscal Year, and to review annual work plans and budgets for subsequent year, as part of the Emergency Plan for AIDS

Relief review and approval process for Country Operational Plans, managed by the Office of the U.S. Global AIDS Coordinator.

23. Provide technical assistance, as mutually agreed upon, and revise annually during validation of the first and subsequent annual work plans. This could include expert technical assistance and targeted training activities in specialized areas, such as strategic information, project management, confidential counseling and testing, palliative care, treatment literacy, and adult learning techniques.
24. Provide in-country administrative support to help grantee meet U.S. Government financial and reporting requirements.

Please note: Either HHS staff or staff from organizations that have successfully competed for funding under a separate HHS contract, cooperative agreement or grant will provide technical assistance and training.

II. Award Information

Type of Award: Cooperative Agreement. HHS involvement in this program is listed in the Activities Section above.

Fiscal Year Funds: FY 2005

Approximate Total Funding: \$2,765,000 (This amount is an estimate, and is subject to availability of funds.)

Approximate Number of Awards: One

Approximate Average Award: \$ 553,000 (This amount is for the first 12-month budget period, and includes direct costs).

Floor of Award Range: \$553,000

Ceiling of Award Range: \$553,000

Anticipated Award Date: September 15, 2005

Budget Period Length: 12 months

Project Period Length: Five years

Throughout the project period, HHS' commitment to continuation of awards will be conditioned on the availability of funds, evidence of satisfactory progress by the recipient (as documented in required reports), and the determination that continued funding is in the best interest of the Federal Government, through the Emergency Plan for AIDS Relief review and approval process for Country Operational Plans, managed by the Office of the U.S. Global AIDS Coordinator.

III. Eligibility Information

III.1. Eligible applicants

This is a single-eligibility Request for Application (RFA) from the Haitian MSPP. No other applicants are solicited.

The Haitian MSPP has the authority and responsibility for both regulation and QA/QC of all laboratories within the country, including establishing norms and standards.

The MSPP is the only entity that has the authority to establish and operate the entire public health system in Haiti, which includes departmental hospitals and clinics that provide ARVs. The Ministry has developed public/private partnerships to help manage some of these sites, but even at those sites managed by the private sector, they are ultimately accountable to the MSPP for quality care. The MSPP still maintains a supervisor role for these sites.

The role of regulation and standard-setting at a national level is inherently governmental. To fulfill its role in this area, the Haitian Ministry of Health needs to have the capacity to independently verify compliance through a central HIV/AIDS quality-assurance/quality-control laboratory.

III.2. Cost-Sharing or Matching Funds

Matching funds are not required for this program.

III.3. Other

If applicants request a funding amount greater than the ceiling of the award range, HHS/CDC will consider the application non-responsive, and it will not enter into the review process. We will notify you that your application did not meet the submission requirements.

Special Requirements:

If the application is incomplete or non-responsive to the special requirements listed in this section, it will not enter into the review process. We will notify you that your application did not meet the submission requirements.

- HHS/CDC will consider late applications non-responsive. See section "IV.3. Submission Dates and Times" for more information on deadlines.
- Note: Title 2 of the United States Code Section 1611 states that an organization described in Section 501(c)(4) of the Internal Revenue Code that engages in lobbying activities is not eligible to receive Federal funds constituting an award, grant, or loan.

IV. Application and Submission Information

IV.1. Address to Request Application Package

To apply for this funding opportunity use application form PHS 5161-1.

HHS strongly encourages you to submit your application electronically by using the forms and instructions posted for this announcement at www.grants.gov.

Application forms and instructions are available on the HHS/CDC web site, at the following Internet address:
www.cdc.gov/od/pgo/forminfo.htm

If you do not have access to the Internet, or if you have difficulty accessing the forms on-line, you may contact the HHS/CDC Procurement and Grants Office Technical Information Management Section (PGO-TIM) staff at: 770-488-2700. We can mail application forms to you.

IV.2. Content and Form of Submission

Application: You must submit a project narrative with your application forms. You must submit the narrative in the following format:

- Maximum number of pages: 30. If the narrative exceeds the page limit, we will only review the first pages within the page limit.
- Font size: 12 point unreduced.
- Paper size: 8.5 by 11 inches.
- Page margin size: One inch.
- Number all pages of the application sequentially from page 1 (Application Face Page) to the end of the application, including charts, figures, tables, and appendices.
- Double-spaced
- Printed only on one side of the page.
- Held together only by rubber bands or metal clips; not bound in any other way.
- Submitted in English.

Your narrative should address activities to be conducted over the entire project period, and must include the following items in the order listed:

EXECUTIVE SUMMARY: Provide a clear and concise summary of the proposed goals, major objectives and activities required to achieve program goals and justify the amount of

funding requested for the first budget year of this cooperative agreement.

1. NEED

- Describe the need for the interventions described in the Activities section in Haiti. Include any data on STI and HIV prevalence rates in Haiti.

2. CAPACITY

- Describe the current capability and capacity of the organization to perform the activities described in this RFA.

3. EXPANSION

- Improve the physical layout and infrastructure of the national QA/QC laboratory.
- Procure HIV/AIDS lab equipment, diagnostic test kits and commodities for the national QA/QC laboratory and for a Demographic Health Survey (DHS).
- Identify laboratory technicians in the public health sector who need laboratory training.

4. QA/QC GUIDELINES AND TESTING

- Develop and adopt national QA/QC laboratory guidelines for HIV antibody testing.

- Provide basic laboratory services in support of HIV/AIDS/STI diagnosis and treatment, including:
 - a. Manual and machine-assisted CD4 counts.
 - b. Complete blood counts.
 - c. HIV rapid testing.
 - d. Confirmatory HIV/AIDS testing.
 - e. Tests for STIs.
- Perform QA/QC testing on samples collected from the DHS survey and from antenatal clinic (ANC) serologic surveys in collaboration with other partners.

5. TRAINING AND PROFICIENCY TESTING

- Coordinate a workshop to disseminate the HIV/AIDS testing guidelines to laboratories that perform QA/QC activities nationwide.
- Provide training and information in local languages to laboratory personnel and policy-makers nationwide in Haiti on the new QA/QC guidelines, the importance of QA/QC in the laboratory setting, and the rationale for the national HIV QA/QC program.

- Set up a central ARV training laboratory at l'Hopital de la Paix (Delmas 33, MSPP).
- Develop a CD4 testing technology training curriculum and training materials in local languages for laboratory technicians.
- Provide training and logistics to provide antiretroviral (ARV) laboratory training in local languages to laboratory personnel at ARV sites.
- Train appropriate local personnel in local languages in maintenance of laboratory equipment.
- Train appropriate local personnel in local languages in laboratory safety and protocols for the proper disposal of biohazardous materials.
- Train local personnel in local languages in universal precautions and management of needle-stick and splash injuries.
- Provide regular in-service training in local languages for lab personnel to review new and best practice techniques, and to request "insider insight" from internal and external sources. This insight should include real-life

experiences with programmatic challenges and/or program success stories. The goal of these reviews will be to identify resource gaps or problems with the effectiveness of specific laboratory protocols.

- Develop a training curriculum and training materials in local languages for a course in basic laboratory equipment maintenance, and an advanced course in bio-engineering practices.
- Provide training and logistics in local languages for 16 laboratory staff members to attend bio-medical engineering training. This training will help laboratories maintain and perform basic repairs on laboratory equipment.
- Perform external proficiency testing of the quality of HIV antibody testing at 30 laboratories nationwide in Haiti two times per year.

6. REPORTING

- Develop and disseminate reports summarizing the results generated by the national QA/QC program.

- Report the results of the bi-annual HIV QA/QC proficiency-testing program at MSPP-hosted workshops.

7. COMMODITIES

- Procure one vehicle through a transparent and competitive process for sole use of the QA/QC program to transport the HIV proficiency testing panels to participating laboratories. Provide maintenance, insurance, fuel and a driver to operate this vehicle.
- Develop a log book to monitor mileage and use of the official QA/QC program vehicle.
- Procure information technology (IT) hardware through a transparent and competitive process for logistical support activities.
- Procure maintenance and repair contracts through a transparent and competitive process for HIV/AIDS/STI lab equipment.

8. MONITORING AND EVALUATION

- Implement monitoring and evaluation strategies to assess the following:
 - a. The number and type of tests performed.
 - b. The number and type of training courses

held.

c. The number and type of participants in each training course.

d. Pre-and post-training skill evaluations.

e. The number of lab needle-stick and splash accidents.

f. The number and type of equipment maintenance calls.

- Conduct onsite follow-up to obtain informal feedback, identify problems, and provide additional guidance.

You may include additional information in the application appendices. The appendices will not count toward the narrative page limit. This additional information includes the following:

- Project Budget and Justification
- *Curriculum Vitae*s or Resumes
- Organizational Charts
- Letters of Support

The budget justification will not count in the narrative page limit.

Although the narrative addresses activities for the entire project, the applicant should provide a detailed budget only for the first year of activities, while addressing budgetary plans for subsequent years.

You must have a Dun and Bradstreet Data Universal Numbering System (DUNS) number to apply for a grant or cooperative agreement from the Federal Government. The DUNS number is a nine-digit identification number which uniquely identifies business entities. Obtaining a DUNS number is easy, and there is no charge. To obtain a DUNS number, access www.dunandbradstreet.com or call 1-866-705-5711.

For more information, see the HHS/CDC Web site at:

<http://www.cdc.gov/od/pgo/funding/grantmain.htm>.

If your application form does not have a DUNS number field, please write your DUNS number at the top of the first page of the application, and/or include the DUNS number in your application cover letter.

Additional requirements that could require you to submit additional documentation with the application are listed in

section "VI.2. Administrative and National Policy Requirements."

IV.3. Submission Dates and Times

Application Deadline Date: September 12, 2005

Explanation of Deadlines: Applications must be received in the HHS/CDC Procurement and Grants Office by 4:00 p.m. Eastern time on the deadline date.

You may submit your application electronically at www.grants.gov. We consider applications completed on-line through Grants.gov as formally submitted when the applicant organization's Authorizing Official electronically submits the application to www.grants.gov. We will consider electronic applications as having met the deadline if the application organization's Authorizing Official has submitted the application electronically to Grants.gov on or before the deadline date and time.

If you submit your application electronically with Grants.gov (<http://www.grants.gov>), your application will be electronically time/date stamped, which will serve as receipt of submission. You will receive an e-mail notice of receipt when HHS/CDC receives the application.

If you submit your application by the United States Postal Service or commercial delivery service, you must ensure the carrier will be able to guarantee delivery by the closing date and time. If HHS/CDC receives your submission after closing because: (1) carrier error, when the carrier accepted the package with a guarantee for delivery by the closing date and time, or (2) significant weather delays or natural disasters, you will have the opportunity to submit documentation of the carrier's guarantee. If the documentation verifies a carrier problem, HHS/CDC will consider the submission as received by the deadline.

If you submit a hard copy application, HHS/CDC will not notify you upon receipt of your submission. If you have a question about the receipt of your application, first contact your courier. If you still have a question, contact the PGO-TIM staff at: 770-488-2700. Before calling, please wait two to three days after the submission deadline. This will allow time for us to process and log submissions.

This announcement is the definitive guide on application content, submission address, and deadline. It supercedes

information provided in the application instructions. If your submission does not meet the deadline above, it will not be eligible for review, and we will discard it. We will notify you that you did not meet the submission requirements.

IV.4. Intergovernmental Review of Applications

Executive Order 12372 does not apply to this program.

IV.5. Funding Restrictions

Restrictions, which you must take into account while writing the budget, are as follows:

- Funds may not be used for research.
- Reimbursement of pre-award costs is not allowed.
- Funds may not be used for construction.
- Funds may be spent for reasonable program purposes, including personnel, travel, supplies, and services. Equipment may be purchased if deemed necessary to accomplish program objectives; however, prior approval by HHS/CDC officials must be requested in writing.
- All requests for funds contained in the budget shall be stated in U.S. dollars. Once an award is made, HHS/CDC will not compensate foreign grantees for

currency exchange fluctuations through the issuance of supplemental awards.

- The costs that are generally allowable in grants to domestic organizations are allowable to foreign institutions and international organizations, with the following exception: With the exception of the American University, Beirut and the World Health Organization, Indirect Costs will not be paid (either directly or through sub-award) to organizations located outside the territorial limits of the United States or to international organizations, regardless of their location.
- The applicant may contract with other organizations under this program; however, the applicant must perform a substantial portion of the activities (including program management and operations, and delivery of prevention services for which funds are required).
- You must obtain an annual audit of these HHS/CDC funds (program-specific audit) by a U.S.-based audit firm with international branches and current licensure/authority in-country, and in accordance with International Accounting Standards or equivalent standard(s) approved in writing by HHS/CDC.

- A fiscal Recipient Capability Assessment may be required prior to or post award, to review the applicant's business management and fiscal capabilities regarding the handling of U.S. Federal funds.
- Funds received from this announcement will not be used for the purchase of antiretroviral drugs for treatment of established HIV infection (with the exception of nevirapine in Prevention of Mother-to-Child Transmission (PMTCT) cases and with prior written approval), occupational exposures, and non-occupational exposures and will not be used for the purchase of machines and reagents to conduct the necessary laboratory monitoring for patient care.
- Needle Exchange - No funds appropriated under this Act shall be used to carry out any program of distributing sterile needles or syringes for the hypodermic injection of any illegal drug.

Prostitution and Related Activities

The U.S. Government is opposed to prostitution and related activities, which are inherently harmful and dehumanizing, and contribute to the phenomenon of trafficking in persons.

Any entity that receives, directly or indirectly, U.S. Government funds in connection with this document ("recipient") cannot use such U.S. Government funds to promote or advocate the legalization or practice of prostitution or sex trafficking. Nothing in the preceding sentence shall be construed to preclude the provision to individuals of palliative care, treatment, or post-exposure pharmaceutical prophylaxis, and necessary pharmaceuticals and commodities, including test kits, condoms, and, when proven effective, microbicides.

A recipient that is otherwise eligible to receive funds in connection with this document to prevent, treat, or monitor HIV/AIDS shall not be required to endorse or utilize a multisectoral approach to combating HIV/AIDS, or to endorse, utilize, or participate in a prevention method or treatment program to which the recipient has a religious or moral objection. Any information provided by recipients about the use of condoms as part of projects or activities that are funded in connection with this document shall be medically accurate and

shall include the public health benefits and failure rates of such use.

In addition, any recipient must have a policy explicitly opposing prostitution and sex trafficking. The preceding sentence shall not apply to any "exempt organizations" (defined as the Global Fund to Fight AIDS, Tuberculosis and Malaria, the World Health Organization and its six Regional Offices, the International AIDS Vaccine Initiative or to any United Nations agency).

The following definition applies for purposes of this clause:

- Sex trafficking means the recruitment, harboring, transportation, provision, or obtaining of a person for the purpose of a commercial sex act. 22 U.S.C. § 7102(9).

All recipients must insert provisions implementing the applicable parts of this section, "Prostitution and Related Activities," in all subagreements under this award. These provisions must be express terms and conditions of the subagreement, must acknowledge

that compliance with this section, "Prostitution and Related Activities," is a prerequisite to receipt and expenditure of U.S. Government funds in connection with this document, and must acknowledge that any violation of the provisions shall be grounds for unilateral termination of the agreement prior to the end of its term. Recipients must agree that HHS may, at any reasonable time, inspect the documents and materials maintained or prepared by the recipient in the usual course of its operations that relate to the organization's compliance with this section, "Prostitution and Related Activities."

All prime recipients that receive U.S. Government funds ("prime recipients") in connection with this document must certify compliance prior to actual receipt of such funds in a written statement that makes reference to this document (e.g., "[Prime recipient's name] certifies compliance with the section, 'Prostitution and Related Activities.'") addressed to the agency's grants officer. Such certifications by prime recipients are prerequisites

to the payment of any U.S. Government funds in connection with this document.

Recipients' compliance with this section, "Prostitution and Related Activities," is an express term and condition of receiving U.S. Government funds in connection with this document, and any violation of it shall be grounds for unilateral termination by HHS of the agreement with HHS in connection with this document prior to the end of its term. The recipient shall refund to HHS the entire amount furnished in connection with this document in the event HHS determines the recipient has not complied with this section, "Prostitution and Related Activities."

You may find guidance for completing your budget on the HHS/CDC web site, at the following Internet address:
<http://www.cdc.gov/od/pgo/funding/budgetguide.htm>.

IV.6. Other Submission Requirements

Application Submission Address:

HHS/CDC strongly encourages you to submit applications electronically at: www.grants.gov. You will be able to download the application package from www.grants.gov,

complete it off-line, and then upload and submit the application via the Grants.gov site. We will not accept e-mail submissions. If you are having technical difficulties in Grants.gov, you may reach them by e-mail at support@grants.gov, or by phone at 1-800-518-4726 (1-800-518-GRANTS). The Customer Support Center is open from 7:00 a.m. to 9:00 p.m. Eastern Time, Monday through Friday.

HHS/CDC recommends that you submit your application to Grants.gov early enough to resolve any unanticipated difficulties prior to the deadline. You may also submit a back-up paper submission of your application. We must receive any such paper submission in accordance with the requirements for timely submission detailed in Section IV.3. of the grant announcement. You must clearly mark the paper submission: "BACK-UP FOR ELECTRONIC SUBMISSION."

The paper submission must conform to all requirements for non-electronic submissions. If we receive both electronic and back-up paper submissions by the deadline, we will consider the electronic version the official submission.

We strongly recommend that you submit your grant application by using Microsoft Office products (e.g.,

Microsoft Word, Microsoft Excel, etc.). If you do not have access to Microsoft Office products, you may submit a PDF file. You may find directions for creating PDF files on the Grants.gov web site. Use of file formats other than Microsoft Office or PDF could make your file unreadable for our staff.

OR

Submit the original and two hard copies of your application by mail or express delivery service to the following address:

Technical Information Management- AA212
CDC Procurement and Grants Office
U.S. Department of Health and Human Services
2920 Brandywine Road
Atlanta, GA 30341

V. Application Review Information

V.1. Criteria

Applicants must provide measures of effectiveness that will demonstrate the accomplishment of the various identified objectives of the cooperative agreement. Measures of effectiveness must relate to the performance goals stated

in the "Purpose" section of this announcement. Measures must be objective and quantitative, and must measure the intended outcome. Applicants must submit these measures of effectiveness with the application and they will be an element of evaluation.

We will evaluate your application against the following criteria:

1. Need (20 Points). To what extent does the applicant justify the need for this program within the target community?
2. Work Plan (20 Points). Does the applicant describe strategies that are pertinent and match those identified in the five-year strategy of the President's Emergency Plan and activities that are evidence-based, realistic, achievable, measurable and culturally appropriate in Haiti to achieving the goals of the Emergency Plan? Is the plan adequate to carry out the proposed objectives? How complete and comprehensive is the plan for the entire project period? Does the plan include quantitative process and outcome measures?
3. Monitoring Evaluation and Reporting (20 points). Does the applicant describe a system for reviewing

and adjusting program activities based on monitoring information? Does the plan include indicators developed for each program milestone and incorporated into the quarterly financial and programmatic reports? Are the indicators drawn from the Emergency Plan Indicator Guide? Will the system generate quarterly financial and program reports showing disbursement of funds and progress towards achieving program objectives?

4. Methods (15 Points). Are the proposed methods feasible? To what extent will they accomplish the program goals of the President's Plan for AIDS Relief? Does the applicant demonstrate knowledge of the cultural and political realities in Haiti?
5. Personnel (15 Points). Do the staff members have appropriate experience, including local language skills? Are the staff roles clearly defined? As described, will the staff be sufficient to accomplish the program goals?
6. Eligibility (10 points). Is applicant a Haitian Governmental entity with at least five years of experience in the public health sector? Does the applicant demonstrate the capacity to expand existing HIV/AIDS programs throughout the country,

and are they already integrated into the Haitian national HIV/AIDS program?

7. Budget and Justification (Reviewed, but not scored)

Is the proposed budget for conducting program activities itemized and well-justified? Is it consistent with planned program activities?

V.2. Review and Selection Process

The HHS/CDC Procurement and Grants Office (PGO) staff will review applications for completeness, and HHS Global AIDS program will review them for responsiveness. Incomplete applications and applications that are non-responsive to the eligibility criteria will not advance through the review process. Applicants will receive notification that their application did not meet submission requirements.

A review panel will evaluate complete and responsive applications according to the criteria listed in the "V.1. Criteria" section above.

V.3. Anticipated Announcement and Award Dates

September 15, 2005.

VI. Award Administration Information

VI.1. Award Notices

Successful applicants will receive a Notice of Award (NoA) from the HHS/CDC Procurement and Grants Office. The NoA shall be the only binding, authorizing document between the recipient and HHS/CDC. An authorized Grants Management Officer will sign the NoA, and mail it to the recipient fiscal officer identified in the application.

Unsuccessful applicants will receive notification of the results of the application review by mail.

VI.2. Administrative and National Policy Requirements

45 CFR Part 74 and Part 92

For more information on the Code of Federal Regulations, see the National Archives and Records Administration at the following Internet address:

<http://www.access.gpo.gov/nara/cfr/cfr-table-search.html>

The following additional requirements apply to this project:

- AR-4 HIV/AIDS Confidentiality Provisions.
- AR-6 Patient Care.
- AR-8 Public Health System Reporting Requirements

- AR-12 Lobbying Restrictions
- AR-14 Accounting System Requirements

Applicants can find additional information on these requirements on the HHS/CDC web site at the following Internet address:

<http://www.cdc.gov/od/pgo/funding/ARs.htm>.

You need to include an additional Certifications form from the PHS 5161-1 application in your Grants.gov electronic submission only. Please refer to

<http://www.cdc.gov/od/pgo/funding/PHS5161-1-1-Certificates.pdf>.

Once you have filled out the form, please attach it to your Grants.gov submission as Other Attachments Form.

VI.3. Reporting Requirements

You must provide HHS/CDC with an original, plus two hard copies of the following reports:

1. Semi-annual Progress Report, due not later than six (6) months after the beginning of the budget period. This progress report must contain the following elements:

a. Current Budget Period Activities, Objectives, and Progress.

b. Current Budget Period Financial Progress.

c. Measures of Effectiveness, including progress against the numerical goals of the President's Emergency Plan for AIDS Relief for Haiti.

d. Additional Requested Information.

2. Interim progress report, due no less than 90 days before the end of the budget period. The progress report will serve as the non-competing continuation application, and must contain the following elements:

a. Current Budget Period Activities Objectives.

b. Current Budget Period Financial Progress.

c. New Budget Period Program Proposed Activity Objectives.

d. Budget.

e. Measures of Effectiveness, including progress against the numerical goals of the President's Emergency Plan for AIDS Relief for Haiti.

f. Additional Requested Information.

3. Annual progress report, due no later than 90 days after the end of the budget period. Reports should include progress against the numerical goals of the President's Emergency Plan for AIDS Relief for Haiti.

4. Financial status report, due no later than 90 days after the end of the period.

5. Final financial and performance reports, due no later than 90 days after the end of the project period.

Recipients must mail these reports to the Grants Management or Contract Specialist listed in the "Agency Contacts" section of this announcement.

VII. Agency Contacts

We encourage inquiries concerning this announcement.

For general questions, contact:

Technical Information Management Section
CDC Procurement and Grants Office
U.S. Department of Health and Human Services
2920 Brandywine Road
Atlanta, GA 30341
Telephone: 770-488-2700

For program technical assistance, contact:

Kathy Grooms
HHS/CDC Global AIDS Program
1600 Clifton Road, NE, Mailstop E-04
Atlanta, GA 30333
Telephone: 404-639-8394

e-mail: Kgrooms@cdc.gov

For financial, grants management, or budget assistance,
contact:

Vivian Walker, Grants Management Specialist
CDC Procurement and Grants Office
U.S. Department of Health and Human Services
2920 Brandywine Road
Atlanta, GA 30341
Telephone: 770/488-2724
E-mail: VEW4@CDC.GOV

VIII. Other Information

Applicants can find this and other HHS funding opportunity announcements on the HHS/CDC web site, Internet address: <http://www.cdc.gov> (click on "Funding" then "Grants and Cooperative Agreements"), and on the web site of the HHS Office of Global Health Affairs, Internet address: www.globalhealth.gov.

Dated:

William P. Nichols, MPA
Director

Procurement and Grants Office
Centers for Disease Control
and Prevention
U.S. Department of Health and
Human Services